

EXHIBIT 9 (1 of 4 pages)



520 Lafayette Road North
St. Paul, MN 55155-4194

Industrial surface water discharge of process wastewater application

NPDES/SDS Permit Program

Doc. Type: Permit Application

The National Pollutant Discharge Elimination System (NPDES)/State Disposal System (SDS) Permit Program regulates wastewater discharges to land and surface waters. This application applies to industrial facilities that discharge process wastewater to a surface water of the state. Any other discharge types will require a different permit application.

Complete the application by typing or printing in black ink. Attach additional sheets as necessary. For more information, please contact the Minnesota Pollution Control Agency (MPCA) at: In Metro Area: 651-296-6300 or Outside Metro Area: 800-657-3864.

- Review the application to ensure all requested items are submitted with this application.
- Please make a copy for your records.
- Refer to the Transmittal Form for mailing instructions.

Permittee name:	Smiley Inc	Permit number:	MN 102731
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Facility information

1.	Principal facility activity:	Printing
2.	Product(s) produced:	Printed materials on paper, cloth, other media
3.	Amount of product produced per Unit Time (such as tons/year, kilograms/day):	
	Average:	Maximum:
4.	Raw material(s) consumed:	Water, natural coloring ingredients
5.	Amount of product consumed per Unit Time (such as tons/year, kilograms/day):	
	Average:	Maximum:
	<i>*Provide both daily maximum and long-term monthly average expected during the five-year permit term. If an effluent limitation guideline applies and is expressed in terms of production (or other measure of operation) please report the expected actual production rates in the units used in the applicable effluent guideline. Consumptive use and/or production rates should be in sufficient detail so as to aid in the development of technology-based effluent limitations. For new discharges, actual production shall be estimated using projected production.</i>	
6.	Standard Industrial Classification (SIC) Code Number (list all that apply):	
	2579	
7.	If established, please indicate what you believe to be the applicable federal effluent limitation guideline(s) for your waste stream(s):	
	40CFR	
8.	What date did the facility initiate operation?	

Water supply

9.	What is the source of the intake water supply for the facility?	Rate of supply (gallons/day)
	<input type="checkbox"/> Municipal water supply, city name:	
	<input checked="" type="checkbox"/> Ground water, intake location:	Fishtown facility, Crow Wing County
	<input type="checkbox"/> Surface water, name:	
10.	If this is a surface or ground water intake, please provide the Minnesota Department of Natural Resources (DNR) Water Appropriation Permit Number:	141965

<https://www.pca.state.mn.us>
657-3864

Available in alternative [formats](#)
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651-296-6300
Use your preferred relay service

800-
657-3864

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11	Is the intake water supply chlorinated or otherwise disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No
12	Is the intake water supply treated with a scale and/or corrosion inhibitor? <input type="checkbox"/> Yes <input type="checkbox"/> No



Wastewater treatment

13	How does the facility dispose of sewage (sanitary wastewater)?	
	Drainage/sewage system	
14	Does the facility generate process wastewater? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	If yes, the process wastewater from the facility is disposed of to: (check all that apply)	
	<input type="checkbox"/> Municipal storm sewer	<input type="checkbox"/> Land
	<input type="checkbox"/> Sanitary sewer	<input type="checkbox"/> Surface water:
	<input type="checkbox"/> Stormwater retention basin or pond	<input type="checkbox"/> Other (specify):
	<input type="checkbox"/> Septic tank/drainfield	
15	Provide a complete description of the existing or proposed wastewater treatment system. For existing facilities, indicate what changes, if any, have occurred since the last permit was issued.	
	Majority of wastewater is disposed of through waste reclamation vendor; 3% through drainage system	
16	Completely describe the type, amount, and fate of all residual solids, sludge, silage, and by-products generated from facility operations and/or wastewater treatment.	
	Smiley Inc uses Toxins R Us to remove wastewater for disposal	
17	Identify the discharge rate in million gallons per day (MGD) and other information for each wastewater outfall discharge point:	

Station ID/ Outfall number	Type of wastewater/waste streams	Discharge flow rate, average (MGD)	Maximum Daily Design flow rate (MGD)	Discharge flow rate, maximum (MGD)	Discharge frequency	Route to receiving waters

Maximum design daily flow: This is the design flow of the treatment system.

Maximum daily flow: This is the anticipated maximum daily flow rate for the next 5 year permit term.

Average daily flow: This is the anticipated average daily flow rate for the next 5 year permit term.

18	Attach a topographical map of the route of discharge to the receiving waters. If this is a discharge to a storm sewer, you must show the route of the storm sewer to a receiving water body. A map showing only the discharge to a storm sewer is unacceptable. The map must show how and where the facility's waste stream enters a receiving water body.
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Groundwater monitoring

19	Are there groundwater monitoring wells or lysimeters at your facility? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, describe where were installed and the reason they were installed:

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Chemical additives

20 List below all chemical additives that are approved for use at the facility. This includes the process reagents, flocculants, ~~desolants~~, corrosion inhibitors, biocides, wastewater treatment chemical additives, chlorine or other disinfectants, detergents, cleaning products, freeze conditioning agents, etc. MPCA approval is required for any additives that are new, increasing in usage, or not previously approved. Go to the MPCA chemical additive webpage at: <https://www.pca.state.mn.us/business-with-us/wastewater-permit-additional-guidance-and-information> to find the documents necessary to complete the approval process. Your additives will not be approved for use until you complete this process.

Product name	Purpose	Location in process of chemical addition	Frequency of addition	Type of application (slug dosing or continuous feed)	Average rate of use (weight or volume per day)	Maximum rate of use (weight or volume per day)	Date of approval (mm/dd/yyyy)
Solvent	Bind paint ingredients	Beginning	Every batch	Slug	2500 lbs	4500	5/23/2017
Rose Riveter Red Ink #2	Coloring	Middle	As needed for color	Slug	300 lbs	500 lbs	5/23/2017
Jawndithuk Yellow Ink #7	Coloring	Middle	As needed for color	Slug	250 lbs	375 lbs	5/23/2017
Blues Bros Blue Ink #5	Coloring	Middle	As needed for color	Slug	300 lbs	425 lbs	5/23/2017

An Additional Chemical Additives attachment is available on the MPCA website at <https://www.pca.state.mn.us/business-with-us/wastewater-permit-forms> if more space is needed.

21. Do you use chemical dust suppressants at your facility? ☐ Yes ☒ No

If yes, fill out table below:

Product name	Location of use	Frequency of use	Average rate of use (weight or volume per day)	Maximum rate of use (weight or volume per day)

Attach the Material Safety Data Sheets, complete product labels and any other information on chemical composition, aquatic toxicity, human health, and environmental fate for each chemical dust suppressant. Chemical dust suppressants are approved separately from the process required in question 20.

Water quality sample results

22 Attach a list of all pollutants known or reasonably believed to be present at each facility discharge point and provide sample results for those pollutants.

Pollutants may include, but are not limited to, total suspended solids, biochemical oxygen demand, pH, fecal coliform, temperature (heat), nutrients (phosphorus, ammonia, nitrate, nitrite), metals, salts, cyanide, residual chlorine, fluoride, oil and grease, polychlorinated biphenyls, phenols, polynuclear aromatic hydrocarbons, volatile organic compounds, pesticides and/or radioactivity. Clearly indicate the date, location where sample was taken, types of wastewater sampled, and method(s) of sampling (e.g. grab, composite) for each sample.

At a minimum, sample results must be provided for total suspended solids (TSS), biochemical oxygen demand (BOD), fecal coliform (if believed present or sanitary wastes will be discharged), pH, and total phosphorus, irrespective of what might be required by an existing permit.

If this is an application for reissuance of an existing permit, review your existing NPDES/SDS permit to see if it has special testing requirements as part of the application for reissuance process.

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23	Certified laboratory analyzing samples:	Abbey Road Chemical Analysis Services, Inc.
	Minnesota Department of Health Certification Number:	122137

Stormwater

24	Is the facility covered by an MPCA stormwater NPDES permit? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, indicate the permit number (if stormwater discharges are authorized under the stormwater general permit give unique identifying number rather than general permit number):
25	Does stormwater contact any raw or processed materials, finished products, industrial waste, byproducts, or any other type of materials at the facility? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, describe these materials:
26	Is any vehicle maintenance, transportation equipment cleaning, or airport deicing conducted at the facility? <input type="checkbox"/> Yes <input type="checkbox"/> No
27	Indicate where stormwater from the facility discharges to:
28	Summarize any treatment or best management practices that are used to regulate stormwater discharges at the facility:

Attachments

- ☐ **Pond Attachment:** If your facility has a pond treatment component (i.e., primary, secondary, aerated, polishing, cooling, etc.), complete the Pond Attachment.